STATE OF TEXAS § COUNTY OF \_\_\_\_\_\_ §

## LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS that I, \_\_\_\_\_ (Taxpayer) of \_\_\_\_\_ (Company name), hereby make, constitute, and appoint \_\_\_\_\_ (Taxpayer representative), as my true and lawful attorney in fact for me and in my name, place and stead; for the following purposes only: To seek a refund of Texas \_\_\_\_\_ taxes for the periods of \_\_\_\_\_ through \_\_\_\_\_\_. This includes the right to request and receive any documentation on file with the Comptroller of Public Accounts in order to prove my right to a refund, to amend and sign any tax return(s) originally filed during these time periods, and to receive any and all information pertaining to my refund request. Modes of communication for requesting and receiving information may include telephone, e-mail, fax or mail. Dated this \_\_\_\_\_ day of \_\_\_\_\_ , \_\_\_\_. Signature Relationship to Entity (i.e., President, Treasurer) Taxpayer number Area code/daytime phone number